



**DELAWARE HEALTH  
AND SOCIAL SERVICES**

Division of Health Care Quality  
Office of Long Term Care  
Residents Protection

3 Mill Road, Suite 308  
Wilmington, Delaware 19806  
(302) 421-7400

**STATE SURVEY REPORT**

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**NAME OF FACILITY: Somerford Place Assisted Living**

**DATE SURVEY COMPLETED: July 27, 2020**

SECTION	STATEMENT OF DEFICIENCIES SPECIFIC DEFICIENCIES	ADMINISTRATOR'S PLAN FOR CORRECTION OF DEFICIENCIES	COMPLETION DATE
	<p>A COVID-19 Focused Infection Control and Focused Emergency Preparedness Survey was conducted by the State of Delaware Division of Health Care Quality, Office of Long Term Care Residents Protection from July 23, 2020 through July 27, 2020. The facility was found to be out of compliance with the Title 16 Health and Safety Delaware Administrative Code, 3225 Assisted Living Facilities infection control regulations and the Governor's Eighth Modification of the Declaration of the State of Emergency for COVID-19 screening requirements by high-risk essential businesses. The sample size was three residents. The facility census on the first day of the survey was 44.</p> <p>Abbreviations/Definitions used in this report:</p> <p>DRC – Director of Resident Care; ED - Executive Director; LPN – Licensed Practical Nurse; Pulse oximetry – A test that measures the oxygen level in the blood; RN – Registered Nurse.</p> <p><b>Regulations for Assisted Living Facilities</b></p> <p><b>3225.0 Authority and Applicability</b></p> <p><b>3225.2.0 Infection Control</b></p> <p><b>3225.9.0 All rules of the Delaware Division of Public Health are followed so there is minimal danger of transmission to staff and residents.</b></p> <p><b>3225.9.1.2 This requirement was not met as evidenced by:</b></p> <p>Based on interview, review of the facility policy and procedure and other sources as indicated, it was determined that the facility failed to thoroughly screen employees in ac-</p>		
		A. Unable to correct the deficient practice.	7/23/20

Provider's Signature

*Denise Williams*

Title

*ED*

Date

*9/21/2020*



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	<p>cordance with the Governor's Eighth Modification of the Declaration of the State of Emergency and the Public Health Authority's screening requirements for high-risk essential businesses. Findings include:</p> <p>3/30/2020 at 5 PM – The Eighth Modification of the Declaration of a State of Emergency for the State of Delaware due to a Public Health Threat (COVID-19) was issued by the Governor. Under section "... 2. PUBLIC HEALTH, a. Effective April 1, 2020 at 8:00 a.m. ... essential businesses that the Public Health Authority deems high-risk shall screen every employee, visitor and member of the public upon entering ...".</p> <p>The DHSS Division of Public Health website posted an undated document entitled "High-Risk Essential Businesses" that stated, "...The Division of Public Health... deemed the following business to be high-risk essential businesses ... Any facility licensed by the Division of Health Care Quality ...".</p> <p>7/21/2020 (last updated) – The DHSS Division of Public Health's document entitled "Essential Services Screening Recommendations for COVID-19 Pandemic" stated, "... Governor... and Delaware Division of Public Health Director... are requiring that high-risk businesses are strongly recommended that all other employers, screen employees each day before work by following these steps...For those employees who must report to work: each employee must be asked about and report body temperature at or above 99.5 degrees Fahrenheit (F)...Employers must screen each incoming employee with a basic questionnaire, which should include at least...Do you have symptoms of respiratory infection (fever or shaking chills, cough, shortness of breath, severe sore throat, loss of taste or smell, or</p>	<p>B. All team members have the potential to be affected by this alleged deficient practice.</p> <p>C. Immediate actions taken: the Coronavirus (Covid19) Team member screening tool and log was immediately updated to indicate fever &gt;99.5 on 7/23/2020 (see attached).</p> <p>D. RCA revealed community leadership was overwhelmed with the amount and every changing information coming from the CDC, SHOC, and Five Star. RDO and RDH will educate community leadership (ED and DRC) to notify appropriate regional team member with state specific guidelines that differ from company guidelines to seek assistance with updating to meet the more stringent requirements. To be completed by 9/25/20.</p> <p>DRC completed the training on 8/1/20 to all team members which includes administrative, nursing, dining, and housekeeping on the updated team member screening tool and temperature requirement (see attached roster)</p> <p>E. The ED and DRC will attend the scheduled SHOC call to obtain state regulatory updates.</p>	<p>7/23/20</p> <p>7/23/20</p> <p>9/25/20</p> <p>8/1/20</p> <p>Ongoing weekly</p>

Provider's Signature

*Donna Williams*

Title

ED

Date

9/21/2020



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	<p>muscle aches) or nausea or vomiting, diarrhea, or headache, congestion or runny nose?...Have you been in close contact (e.g., within 6 feet for more than 15 minutes) with a person with confirmed COVID-19 infection?..."</p> <p>(<a href="https://coronavirus.delaware.gov/wp-content/uploads/sites/177/2020/07/7.21-Essential-Services-Screening-Policy_final.pdf">https://coronavirus.delaware.gov/wp-content/uploads/sites/177/2020/07/7.21-Essential-Services-Screening-Policy_final.pdf</a>)</p> <p>Review of the facility's policy and procedure titled Coronavirus (COVID-19), with an original date of 3/4/2020 and an effective date of 7/13/2020 stated, "... I...Coronavirus (COVID-19) may include: ... 1. Fever (Temperature &gt; 100F) ... III. PROCEDURE A. ... Screenings are conducted and documented using the applicable screening tool and log for the following...</p> <p>5. Team Member Screening:</p> <p>a. All team members are screened for fever and/or respiratory symptoms prior to the beginning of each shift. Complete the Team Member portion of the Team Member, Resident, and Visitor Screening Tool and Log..."</p> <p>There was lack of evidence that the above policy and procedure included asking incoming employees if they'd had temperatures of 99.5 F or greater.</p> <p><u>COVID-19 INCOMING EMPLOYEE SCREENING:</u></p> <p>- 6/12/2020 through 6/21/2020 – Review of the facility's form titled "COVID-19", provided to the Surveyor by E2 (DRC) as the facility's evidence of incoming employee screening was reviewed.</p> <p>Although the facility documented the tem-</p>	<p>The ED and DRC will compare information with current relevant policies to see if updates are required. If updates are needed the ED/DRC will contact the RDO/RDH for assistance.</p>	

Provider's Signature Danise Williams

Title ED

Date 9/21/2020



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	<p>perature of the employees, there was lack of evidence of screening by asking employees if they had temperatures of 99.5 F or above and lack of evidence that the facility thoroughly screened incoming employees by utilizing the facilities basic questionnaire, as per the above policy and Public Health guidance.</p> <p>- 6/20/2020 3:00 PM to 6/22/2020 8:57 AM - Review of the facility's form titled "Coronavirus (COVID-19) Visitor Screening Tool and Log", dated 4/13/2020, was reviewed. The document included the initials of seven employees and their temperatures, which were all below 99.5 F. The screening tool had a question whether the employee had a "Fever greater than 100.4 F within the past 14 days", however, the tool lacked asking employees if they'd had temperatures of 99.5 F or above.</p> <p>There was also a lack of evidence that these employees were thoroughly screened by the facility's basic questionnaire.</p> <p>- 6/22/2020 through 7/1/2020 - Review of the facility's form titled "COVID-19" revealed documentation of employees with temperatures all below 99.5 F.</p> <p>Although the facility documented the temperatures of the employees, there was lack of evidence of screening for temperatures of 99.5 F and above and lack of evidence that the facility thoroughly screened incoming employees by utilizing the facilities basic questionnaire.</p> <p>- 7/22/2020 3:00 PM to 7/23/2020 8:10 PM - Review of the facility's form titled "Coronavirus (COVID-19) Team Member Screening Tool and Log", dated 4/13/2020, revealed that all of the incoming employee</p>		

Provider's Signature *Dorise Williams*

Title ED

Date 9/21/2020



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	<p>temperatures were below 99.5 F.</p> <p>There was lack of evidence that the incoming employee screening tool and log included the facilities basic questionnaire.</p> <p>- 7/23/2020 3:30 PM – During an interview with E2 (DRC), the Surveyor requested a copy of the screening tool currently being utilized by the facility for incoming employees. Shortly thereafter, the Surveyor was provided a blank copy of the facility's form titled "Coronavirus (COVID-19) Team Member Screening Tool and Log", dated 5/14/2020, was reviewed. Review revealed that the required screening of incoming employees was documented on this tool.</p> <p>Additional review of incoming employee screening revealed:</p> <p>- 7/26/2020 7:00 AM to 4:00 PM – Review of the facility's form titled "Coronavirus (COVID-19) Team Member Screening Tool and Log", dated 5/14/2020, was reviewed and revealed that incoming employees were thoroughly screened.</p> <p>- 7/27/2020 4:00 PM – During a telephone interview with E1 (ED), E1 confirmed there was a lack of evidence of thorough screening of incoming employees.</p> <p>Findings were reviewed with E1 (ED) and E2 (DRC) during an Exit Teleconference on 7/27/2020 at 4:50 PM.</p> <p><b>Services</b></p> <p>The assisted living facility shall ensure that the resident's service agreement is being properly implemented.</p> <p>This requirement was not met as evidenced</p>		

Provider's Signature Donise Williams

Title ESD

Date 9/21/2020



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3225.12.0 3225.12.3	<p>by:</p> <p>Based on record review and interview, it was determined that the facility failed to ensure that three (R1, R2, and R3) out of three sampled residents with positive COVID-19 test results were monitored as ordered by the physician. Findings include:</p> <ol style="list-style-type: none"> <li>Review of R1's clinical records revealed the following: <ul style="list-style-type: none"> <li>8/23/2019 – R1 was admitted to the facility with diagnoses including chronic obstructive respiratory disease (a chronic condition in which there is a slow, progressive obstruction of airflow into or out of the lungs).</li> <li>6/12/2020 (Day shift) – Review of the Interdisciplinary (IDC) Progress Note by E2 (DRC) documented on 5/27/2020 that R1 was tested for COVID-19 and on 6/12/2020, the facility received the results of the COVID-19 test and it was positive. In addition, R1 was retested on 6/12/2020. E4 (MD) ordered monitoring of R1's temperature and respiratory system every shift until the 2<sup>nd</sup> test results were obtained by the facility.</li> <li>Review of the IDC progress notes revealed a lack of evidence of monitoring the temperature and/or respiratory system, including pulse oximetry on the following dates/shifts: <ul style="list-style-type: none"> <li>6/12/2020- night shift by E4 (LPN).</li> <li>6/13/2020- night shift by E5 (LPN).</li> <li>6/14/2020- evening shift by E7 (LPN).</li> <li>6/14/2020- night shift by E5 (LPN).</li> <li>6/15/2020 (Day shift) - Review of</li> </ul> </li> </ul> </li> </ol>	<ol style="list-style-type: none"> <li>Unable to correct the deficient practice.</li> <li>All residents have the potential to be affected by this alleged deficient practice.</li> <li>THE RCA showed that the verbal communication from the MD was not communicated timely to the nurses, nurse did not update the service agreement timely upon receipt of the physicians' recommendation for monitoring of temperature and respiratory symptoms (see attached) and IDC progress notes not consistently updated for respiratory symptoms of COVID19 on the affected residents R1, R2, R3</li> <li>The nurses will be re-educated on communicating physician orders accurately and timely, proper documentation of the resident temperature and respiratory symptoms in the IDC progress notes and to update</li> </ol>	<p>7/23/20</p> <p>7/23/20</p> <p>9/17/20</p> <p>9/17/20</p>

Provider's Signature

*Donna Williams*

Title

*EO*

Date

*9/21/2020*



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	<p>the IDC Progress Note by E6 (LPN) documented that R1 was tested for COVID-19 on 6/12/2020 and the facility received the 2<sup>nd</sup> test result which was negative.</p> <p>2. Review of R2's clinical records revealed the following:</p> <ul style="list-style-type: none"> <li>- 8/17/2017 – R2 was admitted to the facility with diagnoses including congestive heart failure and high blood pressure.</li> <li>- 6/12/2020 (Day shift) – Review of the Interdisciplinary (IDC) Progress Note by E2 (DRC) documented on 5/27/2020, R2 was tested for COVID-19 during the monthly testing and on 6/12/2020, the facility obtained the result that R1 was positive for COVID-19. In addition, R2 was retested for COVID-19 on 6/12/2020.</li> <li>- Review of the IDC progress notes revealed a lack of evidence of monitoring the temperature and/or respiratory system, including pulse oximetry on the following dates/shifts: <ul style="list-style-type: none"> <li>▪ 6/12/2020- night shift by E4 (LPN).</li> <li>▪ 6/13/2020 and 6/14/2020 - night shift by E5 (LPN).</li> <li>▪ 6/15/2020 (Day shift) - Review of the IDC Progress Note by E6 (LPN) documented that R1 was retested for COVID-19 on 6/12/2020 and the result was negative.</li> </ul> </li> </ul> <p>3. Review of R3's clinical records revealed the following:</p> <ul style="list-style-type: none"> <li>- 5/10/2017 – R3 was admitted to the</li> </ul>	<p>the service agreement with physician orders received. (see attached roster)</p> <p>Director of Resident Services or designee will monitor 10% of resident's charts to review and audit the physician's orders and IDC nursing notes for appropriate documentation to verify completion and accuracy of the service agreement until 100% compliance.</p> <p>Audit daily x 1 weeks until 100% compliance, 3 times per week x 2 weeks until 100% compliance, 1 week x 2 weeks until 100% compliance achieved. (see attached – audit Tool)</p>	11/1/20

Provider's Signature

*[Handwritten Signature]*

Title

*[Handwritten Title]*

Date

*[Handwritten Date: 9/21/2020]*



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	<p>facility with diagnoses including coronary artery disease (a condition in which major heart blood vessels supplying the heart are narrowed).</p> <ul style="list-style-type: none"><li>- 6/12/2020 (Day shift) – Review of the interdisciplinary (IDC) Progress Note by E2 (DRC) documented on 5/27/2020 that R3 was tested for the monthly COVID-19 testing and on 6/12/2020, the facility obtained the results, which indicated that R3 was positive for COVID-19. In addition, R3 was retested for COVID-19 on 6/12/2020 and R3 was ordered to be monitored for fever and respiratory symptoms until the 2<sup>nd</sup> test results were received.</li><li>- Review of the IDC progress notes revealed a lack of evidence of monitoring the temperature and/or respiratory system, including pulse oximetry on the following dates/shifts:<ul style="list-style-type: none"><li>▪ 6/12/2020- night shift by E4 (LPN).</li><li>▪ 6/13/2020 and 6/14/2020 - night shift by E5 (LPN).</li><li>▪ 6/15/2020 (Day shift) - Review of the IDC Progress Note by E6 (LPN) documented that R1 was retested for COVID-19 on 6/12/2020 and the result was negative.</li></ul></li><li>- 7/24/2020 4:00 PM – An interview with E2 (DRC) revealed that upon receiving the positive COVID-19 test results for R1, R2, and R3, E2 notified E4 (MD). E4 ordered monitoring of temperature and the respiratory system every shift while waiting for results of the 2<sup>nd</sup> COVID-19 tests. E2 stated that monitoring of the respiratory system would include listening to lung sounds and obtaining oxygen saturation levels</li></ul>		

Provider's Signature

*Donna Williams*

Title EO

Date

9/21/2020





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	<p>via a pulse oximetry device. E2 further verbalized that these orders were communicated in the facility's 24-hour shift report. The Surveyor reviewed the monitoring as documented in R1, R2, and R3's clinical records and E2 confirmed that the facility failed to consistently have evidence of monitoring each of the resident's temperature and/or respiratory system on 6/12/2020, 6/13/2020, and 6/14/2020.</p> <p>Findings were reviewed with E1 (ED) and E2 (DRC) during an Exit Teleconference on 7/27/2020 at 4:50 PM.</p>		

Provider's Signature

*[Handwritten Signature]*

Title

ED

Date

07/27/2020



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Provider's Signature *[Signature]*

Title *ED*

Date *9/21/20*



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Title ETD

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